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PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	NIDN-10375
	First Named Inventor	Bjørnerud
	COMPLETE IF KNOWN	
	Application Number	09 / 815,140
	Filing Date	22-Mar-2001
	Group Art Unit	To be assigned
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method of Magnetic Resonance Imaging

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **03/22/2001** as United States Application Number or PCT International Application Number **09/815,140** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9821038.8	GB	09/28/1998	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/106,695	11/02/1998

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
This application is a continuation of PCT/GB99/03134 which is a CIP of US 60/106,695 filed 11/02/1998	09/21/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact with the Patent and Trademark Office connected therewith: ☒ Customer Number 22840 OR ☐ Registered practitioner(s) name/registration number listed below

Place Customer Number
22840

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 22840 OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Atle		Bjørnerud	
Inventor's Signature	<i>Atle Bjørnerud</i>		Date
Residence: City	State	Country	Citizenship
		NO	NO
Post Office Address	Nycomed Imaging AS		
Post Office Address	Nycoveien 1-2, N-0401 Oslo, Norway		
City	State	ZIP	Country

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Kenneth Edmund		Kellar			
Inventor's Signature				Date	
Residence: City	State	Country	US	Citizenship	US
Post Office Address	1504 Cobblestone Court				
Post Office Address	Flemington, New Jersey 08822 US				
City	State	ZIP	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Karen		Briley-Saebo			
Inventor's Signature	<i>Karen Briley Saebo</i>			Date	14/5/01
Residence: City	State	Country	NO	Citizenship	US
Post Office Address	Nycomed Imaging AS				
Post Office Address	Nycoveien 1-2, N-0401 Oslo, Norway				
City	State	ZIP	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Lars		Johansson			
Inventor's Signature	<i>Lars Johansson</i>			Date	07-04-00
Residence: City	State	Country	SE	Citizenship	SE
Post Office Address	Vänortsgatan 104				
Post Office Address	Uppsala, Sweden S-752 63				
City	State	ZIP	Country		

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☒ Customer Number 22840
OR
☐ Registered practitioner(s) name/registration number listed below



Name	Registration Number	Name	PATENT REGISTRATION NUMBER

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 22840 OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Atle	Bjørnerud

Inventor's Signature		Date	
Residence: City	State	Country	NO
		Citizenship	NO

Post Office Address	Nycomed Imaging AS				
Post Office Address	Nycoveien 1-2, N-0401 Oslo, Norway				
City		State		ZIP	
				Country	

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Kenneth Edmund				Kellar			
Inventor's Signature	<i>Kenneth Edmund Kellar</i>					Date	4/18/01
Residence: City		State		Country	US	Citizenship	US
Post Office Address	298 Reaville Road						
Post Office Address	Flemington, New Jersey 08822 US						
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Karen				Briley-Saebo			
Inventor's Signature						Date	
Residence: City		State		Country	NO	Citizenship	US
Post Office Address	Nycomed Imaging AS						
Post Office Address	Nycoveien 1-2, N-0401 Oslo, Norway						
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Lars				Johansson			
Inventor's Signature						Date	
Residence: City		State		Country	SE	Citizenship	SE
Post Office Address	Vänortsgatan 104						
Post Office Address	Uppsala, Sweden S-752 63						
City		State		ZIP		Country	

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